



☐New ☐Change
SATOTravel

PROFILE FORM

Traveler name: Last _____ First _____ MI _____

Phone numbers: Home _____ Business _____ Fax _____

Office address: _____

E-mail address: _____

Travel arranger name: Last _____ First _____ MI _____

Phone numbers: business _____ Fax _____

E-mail address: _____

Seating preference: ☐Window ☐Aisle

Additional information: _____

Special meals: ☐Low sodium ☐Kosher ☐Vegetarian ☐Low fat ☐Other _____

Frequent flyer information:

Airline	ID number	Name (exactly as appears on card)

Rental car preferences:

Car company	ID number	Preferred size

Form of payment: (Public Law 105-264 mandates that the individual Government charge card be used for all official travel expenses)

If you have a exemption from using the individual Government charge card, please provide personal credit card information.

Individual Government charge card number: _____ Expiration date: _____

Hotel preferences: ☐King ☐Double ☐Smoking ☐Non-smoking

Guarantee hotel for late arrival? ☐Yes ☐No

Hotel chain	ID number

Special needs: (i.e., wheelchair or other assistance) _____

Additional information: _____

All data is kept strictly confidential and is only accessible by SATOTravel counselors.